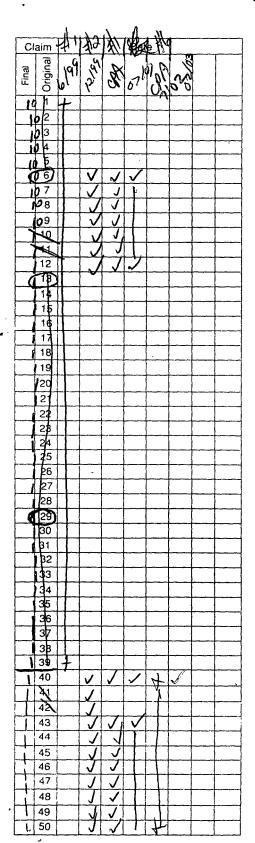
ISSUE STAPLE AREA (for additional cross references) POSITION-INITIALS ID NO. DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** 06485 **INDEX OF CLAIMS** ......Rejected ..... Allowed ..... Interference (Through numeral) Canceled ...... Restricted .... Objected 107 17 24 75 70 33 35 37 148 If more than 150 claims or 10 actions staple additional sheet here (LEFT INSIDE)

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